

TRK # 64714

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILL00000002827	2. Page 1 of 1	3. Emergency Response Phone (800)326-1221	4. Manifest Tracking Number 000338963WAS		
5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312)884-7074			Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WALDEGAN, IL 60085 GEN: 125753				
6. Transporter 1 Company Name JACK GRAY TRANSPORT, INCORPORATED			U.S. EPA ID Number 1HD042834873				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. BROADDALE, IN 46172 Facility's Phone: (765)435-2704			U.S. EPA ID Number 1HD060503870				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	RG UN3092 POLYCHLORINATED BIPHENYLS, SOLID, PGIII, (PCB PENETRATION WASTE - DEBRIS) (20 = 1 LB), ERO#171	1	DT	19491	1	
	2.				06/16		
	3.						
	4.						
14. Special Handling Instructions and Additional Information ILL02541113 142824370 OUT OF SERVICE DATE 05/01/10 W: 19491kg (42880lb) 11/05/2004							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Tom HAHNE		Signature 			Month Day Year 06/01/10		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Transporter signature (for exports only):		Port of entry/exit: Date leaving U.S.:				
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Robert H. WIEDRICH		Signature 			Month Day Year 06/01/10	
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature 			Month Day Year	
	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WRIGHT ADDED TO BOX 11 DUE TO GENERATOR LEFT IT BLANK Manifest Reference Number: 06-2-10						
	18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)		Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
H122							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name DAN MORA		Signature 			Month Day Year 06/02/10		



☐ 7901 W. Morris St.
Indianapolis, IN 46231
(317) 243-0811
IND093219012

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NCD121700777

☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

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Roachdale, IN 46172
(765) 435-2704
IND980503890

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(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

Heritage Environmental Services, LLC certifies that the transaction described by the identifying information below has been conducted as described. Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB Contaminated Building Debris

Disposal Method:

Landfilled

Disposal Date:

02-Jun-10

HES Transaction Number:

2324390

Manifest:

000338963WAS

Net Kg:

19,491


KENNETH S. PRICE, CHAIRMAN



33340 1b

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IL0000802827		2. Page 1 of 1	3. Emergency Response Phone (800) 326-1221		4. Manifest Tracking Number 000338961WAS		
		5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312) 884-7078		Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 20 E. SEAHORSE DRIVE WILMINGTON, IL 60085 GEN: 125093					
6. Transporter 1 Company Name JACK GRAY TRANSPORT, INCORPORATED		U.S. EPA ID Number IND042584875		7. Transporter 2 Company Name		U.S. EPA ID Number			
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. POMONA, IN 46172 Facility's Phone: (765) 425-2704		U.S. EPA ID Number IND020500890							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1. RD UN3492 POLYCHLORINATED BIPHENYLS (SOLID, 9 PCB), (PCB REMEDIATION WASTE - PCBs), (RD = 1, 1B), PCBs 17			1		DT	18664	
		2.						06210	
		3.							
		4.							
14. Special Handling Instructions and Additional Information LAW 0541113 182324388 OUT OF SERVICE DATE 05/01/10 w/ 18664kg (4106lb) TRUCK 35 11381892									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name Tom HAHNE		Signature 					Month Day Year 06/01/10		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: JOSEPH KAMAROLA Signature: Month Day Year: 06/10/10 Transporter 2 Printed/Typed Name: Signature: Month Day Year:								
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WRIGHT ADDED TO BOX 11 DUE TO GENERATOR LEFT IT BLANK @ 6.2.10 Manifest Reference Number:								
	18b. Alternate Facility (or Generator)		U.S. EPA ID Number						
	Facility's Phone:								
	18c. Signature of Alternate Facility (or Generator)		Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H102		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: Signature: Month Day Year: 06/12/10									



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NCD121700777

☐ 15330 Canal Bank Road, N.E.
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(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
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(765) 435-2704
IND980503890

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(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
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(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
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Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB Contaminated Building Debris

Disposal Method:

Landfilled

Disposal Date:

02-Jun-10

HES Transaction Number:

2324388

Manifest:

000338961WAS

Net Kg:

18,664

KENNETH S. PRICE, CHAIRMAN



Heritage Environmental
Service LLC, Landfill
Roachdale, IN

Date / / Unit # JG 35

Job #

Manifest # UCG338961 WAS

Scale Ticket

Gross
07:26AM 02.JUN10

75760 lb

Tare
08:35AM 02.JUN10

34700 lb

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 000326050WAS		
		5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 GEN: 121264-7028		Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WILKEGAN, IL 60095 GEN: 125023				
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC		U.S. EPA ID Number IND0930501111		7. Transporter 2 Company Name		U.S. EPA ID Number		
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. BUSHDALE, IN 46172 Facility's Phone: (765) 425-9724		U.S. EPA ID Number IND0930501290						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		1. PG UN3382 POLYCHLORINATED BIPHENYLS, SOLID, 2, PGIII, (PCB RENEDIATION WASTE - DEBRIS), (LD - 1 LB), (EPCW17)				17694	86,88	K
		2.				052610		
		3.						
		4.						
14. Special Handling Instructions and Additional Information WM 17694kg (39520lb) T.M. 0540159 112318322 OUT OF SERVICE DATE 05/26/10								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offeror's Printed/Typed Name Kristina Sue Gaudin-Mason of SULTRAC for EPA						Signature <i>[Signature]</i> Month Day Year 05 26 10		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:		Date leaving U.S.:			
	Transporter signature (for exports only):							
DESIGNATED FACILITY	17. Transporter Acknowledgment of Receipt of Materials		Signature		Month Day Year			
	Transporter 1 Printed/Typed Name JIM HANLEY		<i>[Signature]</i>		5 26 10			
Transporter 2 Printed/Typed Name		Signature		Month Day Year				
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection		WEIGHT CHANGED IN BOX 11 DUE TO NO SEALS AT GENERATOR SITE 05-26-10						
		Manifest Reference Number: U.S. EPA ID Number						
18b. Alternate Facility (or Generator)								
Facility's Phone:		Month Day Year						
18c. Signature of Alternate Facility (or Generator)								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name DAN RUGA		Signature <i>[Signature]</i>		Month Day Year 05 26 10				

DESIGNATED FACILITY TO GENERATOR



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Indianapolis, IN 46231
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IND093219012

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NCD121700777

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ILD085349264

☐ 8523 NE 38th Street
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MOD981505555

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Roachdale, IN 46172
(765) 435-2704
IND980503890

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OHD005045992

☐ 54 Avenue D
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VTD982766537

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(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB Contaminated Building Debris

Disposal Method:

Landfilled

Disposal Date:

26-May-10

HES Transaction Number:

2318322

Manifest:

000326050WAS

Net Kg:

17,694


KENNETH S. PRICE, CHAIRMAN



Date / / Unit # 4148

Job # _____

Manifest # CUU 326050WAS

Scale Ticket

Gross
02:50PM 26MAY10

73640 1b

Tare 05-21PM 26MAY10

34120 lb

41-46

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 11 0000900297		2. Page 1 of 1		3. Emergency Response Phone (800) 321-1231		4. Manifest Tracking Number 000326051WAS		
		5. Generator's Name and Mailing Address SULTRAC / TOM NAHME 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60656 Generator's Phone: (312) 886-7073		Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 20 E. SEAHORSE DRIVE MAUNEGAN, IL 60085 GEN# 125083						
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC		U.S. EPA ID Number IND050424114		7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. BOONVILLE, IN 46172 Facility's Phone: (219) 285-2204		U.S. EPA ID Number IND050500820								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		1. RD UN3492 POLYCHLORINATED BIPHENYLS, SOLID, 2, PGIII, (PCB REMEDIATION WASTE - DEBRIS), (RD = 1 LB), ER05H171				1 DT		18673 40,200 13	*	
		2. DEBRIS, (RD = 1 LB), ER05H171						1052610		
		3.								
		4.								
14. Special Handling Instructions and Additional Information 1. W3 0540152 182318024 OUT OF SERVICE DATE 5 / 26 / 10 wt: 18673kg (41080lb)										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offeror's Printed/Typed Name KUSH BOND CO. COMMANDER OF SULTRAC CO. EPA										
Signature Kush Bond										
Month Day Year 05 26 10										
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Charles A. H. Signature Charles A. H. Month Day Year 5 26 10 Transporter 2 Printed/Typed Name Signature Month Day Year									
TRANSPORTER	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WEIGHT CHANGED IN BOX 11 DUE TO TWO SCALES AT GENERATOR SITE @ 52610 Manifest Reference Number:									
	18b. Alternate Facility (or Generator) Facility's Phone: U.S. EPA ID Number									
	18c. Signature of Alternate Facility (or Generator) Month Day Year									
DESIGNATED FACILITY	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
	1. 4122		2.		3.		4.			
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name DAN BARCA Signature Dan Barca Month Day Year 05 26 10									



☐ 7901 W. Morris St.
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Subtitle D Landfill

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB Contaminated Building Debris

Disposal Method:

Landfilled

Disposal Date:

26-May-10

HES Transaction Number:

23183224

Manifest:

000326051WAS

Net Kg:

18,673


KENNETH S. PRICE, CHAIRMAN



**Heritage Environmental
Service LLC, Landfill
Roachdale, IN**

Date / / Unit # 4146

Job #

Manifest # 000326051WAB

Scale Ticket

Gross

02:51PM 26MAY10

76400 lb

Tare

03:11PM 26MAY10

35320 lb

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>110000000000</u>		2. Page 1 of <u>1</u>		3. Emergency Response Phone <u>(708) 312-1234</u>		4. Manifest Tracking Number <u>000325769UAS</u>	
		5. Generator's Name and Mailing Address <u>SULTRAC / TOM HAHNE</u> <u>1 S. WACHER DRIVE, SUITE 3700</u> <u>CHICAGO, IL 60606</u> Generator's Phone: <u>(312) 856-7078</u>		Generator's Site Address (if different than mailing address) <u>USEPA REGION 5 / KEVIN ADLER</u> <u>90 E. SEAHORSE DRIVE</u> <u>WILKEDAN, IL 60095</u> GEN: <u>125093</u>					
6. Transporter 1 Company Name <u>HERITAGE TRANSPORT, LLC</u>		U.S. EPA ID Number <u>IND058434114</u>		7. Transporter 2 Company Name		U.S. EPA ID Number		8. Designated Facility Name and Site Address <u>HERITAGE ENVIRONMENTAL SERVICES LLC</u> <u>4370 W. COUNTY ROAD 1275 N.</u> <u>ROACHDALE, IN 46172</u> Facility's Phone: <u>(765) 295-9704</u>	
U.S. EPA ID Number <u>IND058434114</u>		U.S. EPA ID Number <u>IND058434114</u>		U.S. EPA ID Number <u>IND058434114</u>		U.S. EPA ID Number <u>IND058434114</u>		U.S. EPA ID Number <u>IND058434114</u>	
9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity		12. Unit Wt./Vol.	
1.		RD, UN2432 POLYCHLORINATED BIPHENYLS, SOLID, 2, PESTICIDE, (PCB REMEDIATION WASTE AND ASBESTOS), (RD - 1 LB), EPA4171		1 CM		4545		K	
2.		ASBESTOS, (RD - 1 LB), EPA4171				@5.110			
3.		L6							
4.									
14. Special Handling Instructions and Additional Information <u>1. W2_0584479_I#28050020</u> <u>OUT OF SERVICE DATE 05/14/10</u> <u>WT: 4545kg (10000lb)</u>									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name <u>MANALI DESAI OF SULTRAC</u>				Signature <u>MD/</u>				Month Day Year <u>05/17/10</u>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <u>Dennis Shiray</u> Signature <u>Dennis Shiray</u> Month Day Year <u>05/17/10</u> Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____									
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection <u>WEIGHT CHANGED IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE</u> Manifest Reference Number: <u>05-17-10</u>									
18b. Alternate Facility (or Generator) Facility's Phone: _____ Month Day Year _____									
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. <u>H102</u> 2. _____ 3. _____ 4. _____									
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name <u>Dennis Shiray</u> Signature <u>Dennis Shiray</u> Month Day Year <u>05/17/10</u>									



☐ 7901 W. Morris St.
Indianapolis, IN 46231
(317) 243-0811
IND093219012

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(704) 392-6276
NCD121700777

☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
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(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
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(765) 435-2704
IND980503890

☐ 5400 N. Detroit Ave.
Toledo, OH 43611
(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

Heritage Environmental Services, LLC certifies that the transaction described by the identifying information below has been conducted as described. Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

17-May-10

HES Transaction Number:

2305020

Manifest:

000325769WAS

Net Kg:

4,545

KENNETH S. PRICE, CHAIRMAN

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IL D566992027		2. Page 1 of 1		3. Emergency Response Phone (800) 424-9333		4. Manifest Tracking Number 000325328WAS		
		5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312) 884-7078		Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125783						
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC		U.S. EPA ID Number IND053004114								
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765) 425-2704		U.S. EPA ID Number IND060503890								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						No.	Type			
		1. R2, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, PGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (R2 = 1 LB), ER0171					CM	159T 1800		
		2. ASBESTOS, (R2 = 1 LB), ER0171						041510		
		3.								
	4.									
14. Special Handling Instructions and Additional Information L142 0536479 T02271600 OUT OF SERVICE DATE 04 / 15 / 10 wt. 1800Ks (3960lb)										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name MANALI DESAI OF SULTRAC										
Signature MD										
Month Day Year 4 15 10										
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	Transporter signature (for exports only): _____									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name DAVID M SCHRAUB									
Signature David M Schraub										
Month Day Year 4 15 10										
Transporter 2 Printed/Typed Name										
Signature										
Month Day Year										
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WR617 CHARGES IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE Manifest Reference Number: 04-15-10									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone:									
	18c. Signature of Alternate Facility (or Generator) Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. 1132 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a.										
Printed/Typed Name Ann Buma										
Signature Ann Buma										
Month Day Year 04 15 10										



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OHD005045992

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VTD982766537

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(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

15-Apr-10

HES Transaction Number:

2271690

Manifest:

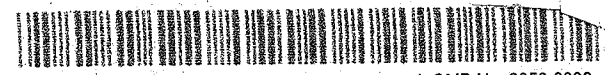
000325328WAS

Net Kg:

1,800

KENNETH S. PRICE, CHAIRMAN

PC 304



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD0000602827	2. Page 1 of 1	3. Emergency Response Phone (800) 324-1221	4. Manifest Tracking Number 000325329WAS		
5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312) 886-7078			Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083				
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC			U.S. EPA ID Number IND058484114				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. FOACHDALE, IN 46172 Facility's Phone: (765) 435-2704			U.S. EPA ID Number IND980503890				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	1. RD, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9 PGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (RD = 1 LB), ERG#171			CM	1591 1800	K	
	2. ASBESTOS, (RD = 1 LB), ERG#171				@41510		
	3.						
4.							
14. Special Handling Instructions and Additional Information 1. W2_0536479_I#2271692 OUT OF SERVICE DATE 04 / 15 / 10 WT: 1800Ks (3960lb)							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name MANALI DESAI OF SULTRAC			Signature MD		Month Day Year 4 15 10		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name DAVID M SCHAUB			Signature David M Schaub		Month Day Year 04 15 10		
Transporter 2 Printed/Typed Name			Signature		Month Day Year		
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WEIGHT CHANGED IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE @ 4/15/10 Manifest Reference Number: U.S. EPA ID Number							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: Month Day Year							
18c. Signature of Alternate Facility (or Generator)							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
H132							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a							
Printed/Typed Name DAVID BARRIS			Signature [Signature]		Month Day Year 04 15 10		



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IND093219012

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☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

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(816) 453-4321
MOD981505555

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(765) 435-2704
IND980503890

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Toledo, OH 43611
(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

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Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

15-Apr-10

HES Transaction Number:

2271692

Manifest:

000325329WAS

Net Kg:

1,800

KENNETH S. PRICE, CHAIRMAN

R0296

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number: ILD0000802827	2. Page 1 of 1	3. Emergency Response Phone: (800) 326-1271	4. Manifest Tracking Number: 000325081WAS	
5. Generator's Name and Mailing Address: SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312) 886-7078			Generator's Site Address (if different than mailing address): USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083			
6. Transporter 1 Company Name: HERITAGE TRANSPORT, LLC			U.S. EPA ID Number: IND058484114			
7. Transporter 2 Company Name:			U.S. EPA ID Number:			
8. Designated Facility Name and Site Address: HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765) 435-2704			U.S. EPA ID Number: IND980503890			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
	1. RO, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PGI11, (PCB REMEDIATION WASTE AND ASBESTOS), (RQ - 1 LB), ERG#171			CM	1591	K
	2.					
	3.					
4.						
14. Special Handling Instructions and Additional Information: 1. W2_Q536479_T#2256953 OUT OF SERVICE DATE 03 / 15 / 10 W1:17094 R0296 (37604) (1364393)						
15. GENERATOR/SOFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name: MANALI DESAI OF SULTRAC			Signature: MD		Month Day Year: 03/31/2010	
16. International Shipments	<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:	
	Transporter signature (for exports only):					
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name: Dennis Shirar			Signature: Dennis Shirar		Month Day Year: 03/31/10	
Transporter 2 Printed/Typed Name:			Signature:		Month Day Year:	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator)			Manifest Reference Number: U.S. EPA ID Number:			
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H192		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 10a						
Printed/Typed Name: Nawab			Signature: Nawab		Month Day Year: 04/09/10	

GENERATOR

INTL

TRANSPORTER

DESIGNATED FACILITY



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Indianapolis, IN 46231
(317) 243-0811
IND093219012

☐ 4132 Pompano Road
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☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
Roachdale, IN 46172
(765) 435-2704
IND980503890

☐ 5400 N. Detroit Ave.
Toledo, OH 43611
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OHD005045992

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AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
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Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

09-Apr-10

HES Transaction Number:

2256953

Manifest:

000325081WAS

Net Kg:

1,709


KENNETH S. PRICE, CHAIRMAN

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <u>11 0000202827</u>		2. Page 1 of <u>1</u>		3. Emergency Response Phone <u>(800) 324-1271</u>		4. Manifest Tracking Number <u>000325059WAS</u>	
		5. Generator's Name and Mailing Address <u>SULTRAC / TOM HAHNE</u> <u>1 S. WACHER DRIVE, SUITE 3700</u> <u>CHICAGO, IL 60606</u> Generator's Phone: <u>(312) 866-7078</u>						Generator's Site Address (if different than mailing address) <u>USEPA REGION 5 / KEVIN ADLER</u> <u>90 E. SEAHORSE DRIVE</u> <u>WAUKEGAN, IL 60085</u> GEN: <u>125083</u>	
TRANSPORTER		6. Transporter 1 Company Name <u>HERITAGE TRANSPORT, LLC</u>						U.S. EPA ID Number <u>IND058434114</u>	
		7. Transporter 2 Company Name						U.S. EPA ID Number	
DESIGNATED FACILITY		8. Designated Facility Name and Site Address <u>HERITAGE ENVIRONMENTAL SERVICES LLC</u> <u>4370 W. COUNTY ROAD 1275 N.</u> <u>ROACHDALE, IN 46172</u> Facility's Phone: <u>(745) 435-2704</u>						U.S. EPA ID Number <u>IND960503890</u>	
		9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	
GENERATOR		10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes	
		No. Type							
		1. <u>RD, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 2, FGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (RD - 1 LB), ER0171</u>		<u>CM</u>		<u>1591</u>		<u>K</u>	
		2.							
		3.							
INT'L		14. Special Handling Instructions and Additional Information <u>1. W2_Q536477_T#2256951</u> <u>OUT OF SERVICE DATE 03 / 15 / 10</u> wt: 1709kg (3760lb)							
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
TRANSPORTER		Generator's/Offor's Printed/Typed Name <u>MANAMI DESAI OF SULTRAC</u>						Signature <u>MD</u>	
		Month Day Year <u>03</u> <u>31</u> <u>2010</u>							
DESIGNATED FACILITY		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
		17. Transporter Acknowledgment of Receipt of Materials							
DESIGNATED FACILITY		Transporter 1 Printed/Typed Name <u>Dennis Shier</u>						Signature <u>Dennis Shier</u>	
		Month Day Year <u>03</u> <u>31</u> <u>10</u>							
DESIGNATED FACILITY		Transporter 2 Printed/Typed Name						Signature	
		Month Day Year							
DESIGNATED FACILITY		18. Discrepancy							
		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
DESIGNATED FACILITY		Manifest Reference Number:						U.S. EPA ID Number	
		18b. Alternate Facility (or Generator)							
DESIGNATED FACILITY		Facility's Phone:							
		18c. Signature of Alternate Facility (or Generator)						Month Day Year	
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
		1. <u>H132</u>		2.		3.		4.	
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
		Printed/Typed Name <u>Dennis Shier</u>						Signature <u>Dennis Shier</u>	
DESIGNATED FACILITY		Month Day Year <u>04</u> <u>09</u> <u>10</u>							



☐ 7901 W. Morris St.
Indianapolis, IN 46231
(317) 243-0811
IND093219012

☐ 4132 Pompano Road
Charlotte, NC 28216
(704) 392-6276
NCD121700777

☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
Roachdale, IN 46172
(765) 435-2704
IND980503890

☐ 5400 N. Detroit Ave.
Toledo, OH 43611
(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

Heritage Environmental Services, LLC certifies that the transaction described by the identifying information below has been conducted as described. Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

09-Apr-10

HES Transaction Number:

2256951

Manifest:

000325059WAS

Net Kg:

1,709


KENNETH S. PRICE, CHAIRMAN



Stop Ticket

Stop#: 1169916-9019

Trip#: 845982

Pick-up: 03/30/10 - 03/30/10

Site#: 125083

Miles: 493

EPA ID#: ILD000802827
PO#: 325919Internal Contact
JAY DRIGGERS (877)381-2341

Mailing Address

TOM HAHNE
SULTRAC
1 S. WACHER DRIVE, SUITE 3700
CHICAGO, IL 60606
UNITED STATES

Site Address

(None)

UESEPA REGION 5
90 E. SEAHORSE DRIVE
WAUKEGAN, IL 60085
UNITED STATESPhone# (312)886-7078
ANDREW, DONNA - (317)390-3161HERITAGE TRANSPORT, LLC (8000) (317)486-2973
IND058484114 US DOT#: 314460

Emergency Rate _____ Pickup Demurrage _____ Final Delivery Demurrage _____

Tractor# 2425 Trailer# 20-25Liner Qty 1 Pump/Hose _____ RO# TO HT RO 274 RO# TO HT _____

PICKUP TIME: 07:00-12:00 RO# TO GEN _____ RO# TO GEN _____

Stop Type PICKUP RO Type OPEN TOP RO Size 25 Liner Qty 1Driver# 4509 Driver Name Dennis Shier Date 3-30-10HERITAGE ENVIRONMENTAL SERVICES LLC (9019) IND980503890
4370 W. COUNTY ROAD 1275 N., ROACHDALE, IN 46172 UNITED STATES (765)435-2704

P/U	Items	Common Name	See Manifest	Transaction	Prod	Ref#	Ord	Type
	1	PCB REMED. WASTE-BLDG DEBR CONT ASBE	000325043WAS-1	2256947	211	N2N	1	CM

ADDL EQUIP:

PPE: GLVS,GOGLS,APRON OR PCTYVEK SUIT

Site Rep
Name MANAU DESAI Signature Manau Desai Date 3-30-2010

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD000802827		2. Page 1 of 1	3. Emergency Response Phone (800)324-1221		4. Manifest Tracking Number 000325043WAS		
		5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312)886-7078		Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083					
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC		U.S. EPA ID Number IND058484114							
7. Transporter 2 Company Name		U.S. EPA ID Number							
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765)435-2704		U.S. EPA ID Number IND980503890							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	RD, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (RD - 1 LB), ERG#171			1 CM		2273 1591	K	
	2.						Q33010		
	3.								
	4.								
14. Special Handling Instructions and Additional Information 1. W2_0536479_T#2256947 OUT OF SERVICE DATE 03 / 12 / 10 <div style="text-align: right;">cd: 2273 kg (5000lb)</div> <div style="text-align: right;">[1363544]</div>									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name MANALI DESAI OF SULTRAC									
Signature Manali Desai									
Month Day Year 03 30 10									
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Dennis Shirar								
Signature Dennis Shirar									
Month Day Year 03 30 10									
Transporter 2 Printed/Typed Name									
Signature									
Month Day Year									
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WEIGHT CHANGED IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE Q3-30-10								
	Manifest Reference Number: _____								
	18b. Alternate Facility (or Generator) U.S. EPA ID Number								
	Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)									
Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132 2. 3. 4.									
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name Dennis Shirar									
Signature Dennis Shirar									
Month Day Year 03 30 10									



Stop Ticket

Stop#: 1169916-9019

Trip#: 845982

Pick-up: 03/30/10 - 03/30/10



Site#: 125083

Miles: 493

EPA ID#: ILD000802827
PO#: 325919Internal Contact
JAY DRIGGERS (877)381-2341

Mailing Address

TOM HAHNE
SULTRAC
1 S. WACHER DRIVE, SUITE 3700
CHICAGO, IL 60606
UNITED STATES

Site Address

(None)

UESEPA REGION 5
90 E. SEAHORSE DRIVE
WAUKEGAN, IL 60085
UNITED STATESPhone# (312)886-7078
ANDREW, DONNA - (317)390-3161HERITAGE TRANSPORT, LLC (8000) (317)486-2973
IND058484114 US DOT#: 314460

Emergency Rate _____ Pickup Demurrage _____ Final Delivery Demurrage _____

Tractor# 2425 Trailer# 20-25Liner Qty 1 Pump/Hose _____ RO# TO HT RO 274 RO# TO HT _____

PICKUP TIME: 07:00-12:00 RO# TO GEN _____ RO# TO GEN _____

Stop Type PICKUP RO Type OPEN TOP RO Size 25 Liner Qty 1Driver# 4509 Driver Name Dennis Shier Date 3-30-10HERITAGE ENVIRONMENTAL SERVICES LLC (9019) IND980503890
4370 W. COUNTY ROAD 1275 N., ROACHDALE, IN 46172 UNITED STATES (765)435-2704

P/U	Common Name	See Manifest	Transaction	Prod	Ref#	Ord	Type
Items							
1	PCB REMED. WASTE-BLDG DEBR CONT ASBE	000325043WAS-1	2256947	211	N2N	1	CM

ADDL EQUIP:

PPE: GLVS, GOGLS, APRON OR PCTYVEK SUIT

Site Rep Name MANAU DESAI Signature Manu Desai Date 3-30-2010



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD000802827	2. Page 1 of 1	3. Emergency Response Phone (800)326-1221	4. Manifest Tracking Number 000325043WAS		
5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312)886-7078			Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WALKEGAN, IL 60085 GEN: 125083				
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC			U.S. EPA ID Number IND058484114				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765)435-2704			U.S. EPA ID Number IND980503890				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
			No.	Type			
	1. RQ, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9 PBIII, (PCB REMEDIATION WASTE AND ASBESTOS), (RQ = 1 LB), ERQ#171			CM	2273 1591	K	
	2.				Q33010		
	3.						
4.							
14. Special Handling Instructions and Additional Information 1. W2_0536479_T#2256947 OUT OF SERVICE DATE 03 / 12 / 10 cd: 2273 kg (5000lb) (1363544)							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name MANALI DESAI OF SULTRAC			Signature <i>Manali Desai</i>		Month Day Year 03 30 10		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Dennis Shirar			Signature <i>Dennis Shirar</i>		Month Day Year 03 30 10		
Transporter 2 Printed/Typed Name			Signature		Month Day Year		
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WEIGHT CHANGED IN BOX 11 DUE TO NO SCABS AT GENERATOR SITE Q3-30-10 Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <i>Dennis Shirar</i>			Signature <i>Dennis Shirar</i>		Month Day Year 03 30 10		



☐ 7901 W. Morris St.
Indianapolis, IN 46231
(317) 243-0811
IND093219012

☐ 4132 Pompano Road
Charlotte, NC 28216
(704) 392-6276
NCD121700777

☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
Roachdale, IN 46172
(765) 435-2704
IND980503890

☐ 5400 N. Detroit Ave.
Toledo, OH 43611
(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

Heritage Environmental Services, LLC certifies that the transaction described by the identifying information below has been conducted as described. Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

30-Mar-10

HES Transaction Number:

2256947

Manifest:

000325043WAS

Net Kg:

2,273


KENNETH S. PRICE, CHAIRMAN



Stop Ticket

Stop#: 1169917-9019

Trip#: 845983

Pick-up: 03/30/10 - 03/30/10

Site#: 125083

Miles: 493

EPA ID#: ILD000802827
PO#: 325919Internal Contact
JAY DRIGGERS (877)381-2341

Mailing Address

TOM HAHNE
SULTRAC
1 S. WACHER DRIVE, SUITE 3700
CHICAGO, IL 60606
UNITED STATES

Site Address

(None)

UESEPA REGION 5
90 E. SEAHORSE DRIVE
WAUKEGAN, IL 60085
UNITED STATESPhone# (312)886-7078
ANDREW, DONNA - (317)390-3161HERITAGE TRANSPORT, LLC (8000) (317)486-2973
IND058484114 US DOT#: 314460

Emergency Rate _____ Pickup Demurrage _____ Final Delivery Demurrage _____

Tractor# 2425 Trailer# 20-25Liner Qty 1 Pump/Hose _____ RO# TO HT RO 217 RO# TO HT _____

PICKUP TIME: 07:00-12:00 RO# TO GEN _____ RO# TO GEN _____

Stop Type PICKUP RO Type OPEN TOP RO Size 25 Liner Qty 1Driver# 4509 Driver Name Donna Shiver Date 3-30-10HERITAGE ENVIRONMENTAL SERVICES LLC (9019) IND980503890
4370 W. COUNTY ROAD 1275 N., ROACHDALE, IN 46172 UNITED STATES (765)435-2704

P/U	Items	Common Name	See Manifest	Transaction	Prod	Ref#	Ord	Type
	1	PCB REMED. WASTE-BLDG DEBR CONT ASBE	000325044WAS-1	2256949	211	N2N	1	CM

ADDL EQUIP:

PPE: GLVS,GOGLS,APRON OR PCTYVEK SUIT

Site Rep
Name MANALI DESAI Signature Manali Desai Date 3/30/2010

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IL D000802827	2. Page 1 of 1	3. Emergency Response Phone (800)326-1221	4. Manifest Tracking Number 000325044WAS	
5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606			Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083			
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC			U.S. EPA ID Number IND058424114			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172			U.S. EPA ID Number IND980503890			
Facility's Phone: (745)435-2704						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. RD, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (RD = 1 LB), ERG#171		CM	2273 1591 Q3-3010	K	
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information 1. W2_Q536479_T#2256949 OUT OF SERVICE DATE 03 / 11 / 10 <div style="text-align: right;">2273K5 (500016)</div>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name MANALI DESAI OF SULTRAC			Signature <i>Manali Desai</i>		Month Day Year 03 30 10	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Dennis Shirer			Signature <i>Dennis Shirer</i>		Month Day Year 03 30 10	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WRIGHT CHAMBER IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE @ 3-30-10 Manifest Reference Number: _____						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H132		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name DAVID ROMBA			Signature <i>David Romba</i>		Month Day Year 03 30 10	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
SULTRAC / TOM HAYNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312) 386-7078		USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083				
6. Transporter 1 Company Name		U.S. EPA ID Number				
HERITAGE TRANSPORT, LLC		IND050404114				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. BROOKDALE, IN 46172 Facility's Phone: (765) 425-2704		IND050503890				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
	1. PO UN3422 POLYCHLORINATED BIPHENYLS, SOLID, 2 PGIII, (PCB REMEDIATION WASTE, AND ASBESTOS), (42 - 1 LB), ER04171		DR	2273 1591 03/30/10		
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information						
LHZ 0536479 IT2256049 OUT OF SERVICE DATE 03 / 11 / 10 wt: 2273kg (5000lb)						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offoror's Printed/Typed Name		Signature		Month	Day	Year
MANALI DESAI OF SULTRAC		[Signature]		03	30	10
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year
DENNIS SHIVER		[Signature]		03	30	10
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
WEIGHT CHANGED IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE @ 3-30-10 Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a.						
Printed/Typed Name		Signature		Month	Day	Year
DAVID [Signature]		[Signature]		03	30	10

Stop Ticket

Stop#: 1169917-9019

Trip#: 845983

Site#: 125083

EPA ID#: ILD000802827
PO#: 325919

Pick-up: 03/30/10 - 03/30/10

Miles: 493

Internal Contact
JAY DRIGGERS (877)381-2341



1 of 1



Mailing Address

TOM HAHNE
SULTRAC
1 S. WACHER DRIVE, SUITE 3700
CHICAGO, IL 60606
UNITED STATES

Site Address

(None)

UESEPA REGION 5
90 E. SEAHORSE DRIVE
WAUKEGAN, IL 60085
UNITED STATES

Phone# (312)886-7078
ANDREW, DONNA - (317)390-3161

HERITAGE TRANSPORT, LLC (8000) (317)486-2973
IND058484114 US DOT#: 314460

Emergency Rate _____ Pickup Demurrage _____ Final Delivery Demurrage _____

Tractor# 2425 Trailer# 20-25

Liner Qty 1 Pump/Hose _____ RO# TO HT RO 217 RO# TO HT _____

PICKUP TIME: 07:00-12:00 RO# TO GEN _____ RO# TO GEN _____

Stop Type PICKUP RO Type OPEN TOP RO Size 25 Liner Qty 1

Driver# 4509 Driver Name Donna Shier Date 3-30-10

HERITAGE ENVIRONMENTAL SERVICES LLC (9019) IND980503890
4370 W. COUNTY ROAD 1275 N., ROACHDALE, IN 46172 UNITED STATES (765)435-2704

P/U	Items	Common Name	See Manifest	Transaction	Prod	Ref#	Ord	Type
	1	PCB REMED. WASTE-BLDG DEBR CONT ASBE	000325044WAS-1	2256949	211	N2N	1	CM

ADDL EQUIP:

PPE: GLVS, GOGLS, APRON OR PCTYVEK SUIT

Site Rep Name MANALI DESAI Signature Manali Desai Date 3/30/2010

58852: BRANDENBURG INDUSTRIAL SERVICE CO.
Company\Loc: 485

Heritage Environmental Services, LLC
www.heritage-enviro.com



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number 11 0000802827	2. Page 1 of 1	3. Emergency Response Phone (800) 326-1221	4. Manifest Tracking Number 000325044WAS		
5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312) 886-7078			Generator's Site Address (if different than mailing address) USEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083				
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC			U.S. EPA ID Number IND058424114				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (745) 435-2704			U.S. EPA ID Number IND980503890				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1.	RO, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (RC = 1 LB), ERG#171	1	CM	2273 1591 23-3010	K	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. W2_Q536479_T#2256949 OUT OF SERVICE DATE 03 / 11 / 10 2273K5 (500016)							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name MANALI DESAI OF SULTRAC		Signature Manali Desai		Month Day Year 03 30 10			
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Dennis Shirar		Signature Dennis Shirar		Month Day Year 03 30 10		
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WRIGHT CHANGED IN BOX 11 DUE TO NO SCALES AT GENERATOR SITE @ 3-30-10 Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name DAVID ROMBA		Signature		Month Day Year 03 30 10			



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IND093219012

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(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
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OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
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Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

Heritage Environmental Services, LLC certifies that the transaction described by the identifying information below has been conducted as described. Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

30-Mar-10

HES Transaction Number:

2256949

Manifest:

000325044WAS

Net Kg:

2,273

KENNETH S. PRICE, CHAIRMAN

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD000802827	2. Page 1 of 1	3. Emergency Response Phone (800) 326-1221	4. Manifest Tracking Number 000315623WAS	
		5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60608 (312) 886-7078		Generator's Site Address (if different than mailing address) UESEFA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083		
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC		U.S. EPA ID Number IND058484114				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765) 435-2704		U.S. EPA ID Number IND080503890			Q3-1810	
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.
	1.	RD, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 2, PGIII, (PCB REMEDIATION WASTE AND ASBESTOS) (RD = 1.1B), ERG3171	1	CM	1955 1391	(EAS) K
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information 1. W2_0586479_I#2241219 OUT OF SERVICE DATE 03/12/10 wt: 1955kg (4300lb) [1358699]						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offoror's Printed/Typed Name CAROL NISSCOFF SULTRAC		Signature Carol Nisscoff		Month Day Year 03/12/10		
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name ERIC SCOTT		Signature Eric Scott		Month Day Year 03/12/10	
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month Day Year	
	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number:					
	18b. Alternate Facility (or Generator)		U.S. EPA ID Number			
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H132		2.		3.		
				4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name DAVID BAMA		Signature David Bama		Month Day Year 1/31/10		



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ILD085349264

☐ 8523 NE 38th Street
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(816) 453-4321
MOD981505555

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OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

18-Mar-10

HES Transaction Number:

2241219

Manifest:

000315623WAS

Net Kg:

1,955


KENNETH S. PRICE, CHAIRMAN

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD0000302827	2. Page 1 of 1	3. Emergency Response Phone (800) 326-1221	4. Manifest Tracking Number 000315624WAS	
5. Generator's Name and Mailing Address SULTRAC / TOM WAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 (312) 886-7078			Generator's Site Address (if different than mailing address) IESEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEGAN, IL 60085 GEN: 125083			
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC			U.S. EPA ID Number IND058484114			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765) 435-2704			U.S. EPA ID Number IND980503890			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
1.	RG, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 2, PGIII, (PCB REMEDIATION WASTE AND ASBESTOS), (60 = 1 LB), EPC4171	1	CM	1964 20	EAS R	
2.				03/18/10		
3.						
4.						
14. Special Handling Instructions and Additional Information LW2 0536479 IP2241221 OUT OF SERVICE DATE 03/12/10 wt 1964kg (4320lb)						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name CAROL NISSON OF SULTRAC				Signature Carol Nisson		Month Day Year 03/12/10
16. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:
Transporter signature (for exports only):						
17. Transporter Acknowledgment of Receipt of Materials		Signature		Month Day Year		
Transporter 1 Printed/Typed Name ERIC SCOTT		Signature Eric Scott		03/12/10		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space		<input type="checkbox"/> Quantity		<input type="checkbox"/> Type		<input type="checkbox"/> Residue
				<input type="checkbox"/> Partial Rejection		<input type="checkbox"/> Full Rejection
Manifest Reference Number:				U.S. EPA ID Number		
18b. Alternate Facility (or Generator)						
Facility's Phone:				Month Day Year		
18c. Signature of Alternate Facility (or Generator)						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
1.	H132					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a				Month Day Year		
Printed/Typed Name M. W. P. R. A.				Signature M. W. P. R. A.		03/18/10

DESIGNATED FACILITY TO GENERATOR



☐ 7901 W. Morris St.
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(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
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(816) 453-4321
MOD981505555

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Roachdale, IN 46172
(765) 435-2704
IND980503890

☐ 5400 N. Detroit Ave.
Toledo, OH 43611
(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

18-Mar-10

HES Transaction Number:

2241221

Manifest:

000315624WAS

Net Kg:

1,964


KENNETH S. PRICE, CHAIRMAN

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD0000802927		Generator's Site Address (if different than mailing address) (800) 326-1221 UESEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE NAUKEGAN, IL 60065 GEN: 125083		000313812WHS	
5. Generator's Name and Mailing Address SULTAC / TOM HAMME 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 (312) 884-7078				U.S. EPA ID Number IND058484114			
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC				U.S. EPA ID Number			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. BOSCHDALE, IN 46172 Facility's Phone: (765) 435-2704				IND980503890			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
X	1. RD, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PGIII, (PCB REMEDIATION WASTE AND ABSTENT) (RD = 1 LB) FPOB171	1	CM	1373	K		
	2.			20	4		
	3.			103	10		
	4.						
14. Special Handling Instructions and Additional Information 1. W2_0536479_I#2241217 all: 1373 kg (3020 lb)							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Manah Desai of Sultac				Signature [Signature]		Month Day 03 11	
16. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:	
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name ERIC SCOTT Signature [Signature] Transporter 2 Printed/Typed Name Signature [Signature]							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WEIGHT CHARGED W BOX 11+12 FOR POLYCHLORINATED BIPHENYLS WAS NOT IN 141606MMMS @ 3.10.10 Manifest Reference Number: U.S. EPA ID Number							
18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator)							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day 03 12							

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.



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Coolidge, AZ 85228
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AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

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GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

12-Mar-10

HES Transaction Number:

2241217

Manifest:

000315612WAS

Net Kg:

1,373


KENNETH S. PRICE, CHAIRMAN



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ILD000802827	2. Page 1 of 1	3. Emergency Response Phone (800)326-1221	4. Manifest Tracking Number 000315611WAS	
5. Generator's Name and Mailing Address SULTRAC / TOM HAHNE 1 S. WACHER DRIVE, SUITE 3700 CHICAGO, IL 60606 Generator's Phone: (312)886-7078			Generator's Site Address (if different than mailing address) UESEPA REGION 5 / KEVIN ADLER 90 E. SEAHORSE DRIVE WAUKEDAN, IL 60085 GEN: 125083			
6. Transporter 1 Company Name HERITAGE TRANSPORT, LLC			U.S. EPA ID Number IND058484114			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address HERITAGE ENVIRONMENTAL SERVICES LLC 4370 W. COUNTY ROAD 1275 N. ROACHDALE, IN 46172 Facility's Phone: (765)435-2704			U.S. EPA ID Number IND980503890			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RD UN3432 POLYCHLORINATED BIPHENYLS, SOLID, PGIII, (PCB REMEDIATION WASTE AND ABSTENTIONS) (RD = 1 LB) ERG#171	1	Can	1591	1K	
	2.			20	4	
				@ 3-12-10		
	3.					
	4.					
14. Special Handling Instructions and Additional Information 1. W2_Q536479_T#2241215 wt. (3500lb) 1591kg [1358369]						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Mainah Desai of Sultrac			Signature Mainah Desai		Month Day Year 3 11 2010	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:			
Transporter signature (for exports only):						
17. Transporter Acknowledgment of Receipt of Materials			Signature		Month Day Year	
Transporter 1 Printed/Typed Name Eric Scott			Signature Eric Scott		6 3 11 10	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection WEIGHT CHANGED IN BOX 11 & 12 DUE TO WEIGHT WAS NOT IN KILOGRAMS @ 3-12-10 Manifest Reference Number: U.S. EPA ID Number						
18b. Alternate Facility (or Generator) Facility's Phone: Month Day Year						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H132		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name David B. ...			Signature David B. ...		Month Day Year 10 3 12 10	



☐ 7901 W. Morris St.
Indianapolis, IN 46231
(317) 243-0811
IND093219012

☐ 4132 Pompano Road
Charlotte, NC 28216
(704) 392-6276
NCD121700777

☐ 15330 Canal Bank Road, N.E.
Lemont, IL 60439
(630) 739-1151
ILD085349264

☐ 8523 NE 38th Street
Kansas City, MO 64161
(816) 453-4321
MOD981505555

☒ 4370 W. Co. Rd. 1275N
Roachdale, IN 46172
(765) 435-2704
IND980503890

☐ 5400 N. Detroit Ave.
Toledo, OH 43611
(419) 476-0942
OHD005045992

☐ 54 Avenue D
Williston, VT 05495
(802) 860-1200
VTD982766537

☐ 5122 East Storey Rd.
Coolidge, AZ 85228
(520) 723-4167
AZD081705402

☐ 4370 W. Co. Rd 1275 N
Roachdale, IN 46172
(765) 435-2704
Subtitle D Landfill

CERTIFICATE OF TREATMENT AND DISPOSAL

HERITAGE ENVIRONMENTAL SERVICES, LLC CERTIFIES AND ASSURES TO OUR CUSTOMERS THAT THE TRANSACTION DESCRIBED BELOW, INCLUDING TREATMENT AND/OR STORAGE AND/OR RECLAMATION AND/OR DISPOSAL HAS BEEN HANDLED IN COMPLIANCE WITH ALL APPLICABLE LOCAL, STATE AND FEDERAL LAWS AND REGULATIONS.

Heritage Environmental Services, LLC certifies that the transaction described by the identifying information below has been conducted as described. Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C. 1001 and 15 U.S.C. 2615), I certify that the information contained in or accompanying this document is true, accurate, and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true, accurate, and complete.

GENERATOR:

USEPA Region 5
90 E. Seahorse Drive
Waukegan, IL 60085

EPA ID NUMBER:

ILD000802827

Wastestream:

PCB & Asbestos Contaminated Soil

Disposal Method:

Landfilled

Disposal Date:

12-Mar-10

HES Transaction Number:

2241215

Manifest:

000315611WAS

Net Kg:

1,591


KENNETH S. PRICE, CHAIRMAN



Fluorecycle, Inc.

Fluorecycle, Inc.

27780 W. Concrete Dr.
Ingleside, IL 60941

Phone: 815-353-4411

Fax: 815-353-4422

E-Mail: sales@fluorecycle.com

Web: www.fluorecycle.com

CERTIFICATE OF DESTRUCTION

This certifies the lamps received from the listed source were destroyed to recyclable components by Fluorecycle Inc. Fluorecycle, Inc. certifies that the destruction of the material below was performed by crushing, separation to component parts, and reclamation of mercury. All processes were performed in accordance with Illinois Administrative Code Title 35, Part 733 "Standards for Universal Waste Management", and other applicable State, Federal and local regulations.

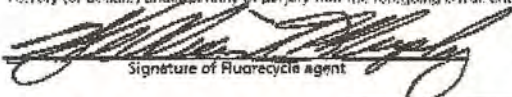
Hazardous Items Received and Destroyed

Description	Quantity
4ft. or less Fluorescent lamps T5 thru T12	3,166
8ft Fluorescent lamps F60-F96, T8 thru T12	1,887
High Intensity Discharge Lamps (HID)	594
Circular T9 Fluorescent Lamps	2
U-Shaped Fluorescent T8 or T12, U3 or U6	167
Pre-crushed Fluorescent lamps per pound	1,146
Incandescent Lamps	7

Certificate Issued to:

	Generator Company	Handler Company
	Verbal	
Company:	Brandenburg Industrial Service	J&J Contracting, Inc.
Address:	Co.	6989 N. 55th Street
	c/o OMC	Oakdale, MN 55128
City, State, Zip:	90 East Seahorse Drive	

I certify (or declare) under penalty of perjury that the foregoing is true and correct.


Signature of Fluorecycle agent


Title

4/9/2010
Disposal Date

20146

CERTIFICATE NUMBER



Fluorecycle, Inc.

Recycler of Fluorescent, HID, & Lamps containing Mercury

Fluorecycle, Inc.

27780 W. Concrete Dr.

Ingleside, IL 60041

Phone: 815-363-4411

Fax: 815-363-4422

E-Mail: sales@Fluorecycle.com

Web: www.fluorecycle.com

Date: 4/9/10

This is to certify that the Batteries sent to Fluorecycle, Inc. , were received and disposed of under environmentally safe conditions in accordance with current Federal, State, and local regulations in the State of Illinois. 'Battery Act May 13, 1996', in full compliance with the regulations put forth per Title 40, CFR 273.

Generator: OMC/Brandenburg Industrial Service Co.

Address: 90 East Seahorse Drive

City: Waukegan


State: Illinois

Zip Code: 60085

Date of Receipt: 3/16/10

Control # 20146

Battery Type: Lead/Calcium Weights: 196 Lbs.


Fluorecycle, Inc. Title

Handler:

J&J Contracting, Inc.

6989 N. 55TH Street

Oakdale, MN 55128



Fluorecycle, Inc.

Recycler of Fluorescent, HID, & Lamps containing Mercury

Fluorecycle, Inc.

27780 W. Concrete Dr.

Ingleside, IL 60041

Phone: 815-363-4411

Fax: 815-363-4422

E-Mail: sales@Fluorecycle.com

Web: www.fluorecycle.com

This is to certify that the Mercury containing devices received by Fluorecycle, Inc. , were Distilled on premise. RCRA Hazardous Waste Mgmt. Part B Log 168, IEPA Certificate 0974455001, U.S. Certificate ILR 000049833, Air Permit issued 1/27/99, I.D. No. 097445AAA. All inspection reports upon request.

Generator: OMC/Brandenburg Industrial Service Co.

Address: 90 East Seahorse Drive

City: Waukegan

State: Illinois

Zip Code: 60085

Date of Receipt: 3/16/10

Control #: 20146

Weight: n/a

Unit's: 1 Description: Thermostat Hg Ampul type

Fluorecycle, Inc., By:

Handler:

J&J Contracting, Inc.

6989 N. 55TH Street

Oakdale, MN 55128

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000782

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 22-00000001		b. Manifest Document Number 312-2		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Seneca Dr. Westbrook, IL 60085		e. Generator's Mailing Address 19. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone: 312-526-7075		g. Phone:				
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm		1 DT	21.11	1N
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) CAROL NISSEN OF SUTRAC FOR EPA				q. Signature <i>[Signature]</i>		r. Date 05/26/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202		
b. Phone:		
c. Driver Name (Print) Long On Hing	d. Signature <i>[Signature]</i>	e. Date 05-26-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Blue	f. Signature <i>[Signature]</i>	g. Date 5/26/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000780

GENERATOR (Generator completes Ia-r) **312-2**

a. Generator's HS EPA ID Number 18100000227		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 20 Seahorse Dr. Waukegan, IL 60085 312-886-7078		e. Generator's Mailing Address Setra 18 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone:		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	20.43 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL WISSEK OF SULTANE FOR EPA			q. Signature <i>[Signature]</i>		r. Date 05/26/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202	
b. Phone:	
c. Driver Name (Print) Kevin G. Hilly	d. Signature <i>[Signature]</i>
e. Date 5-26-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Boyle	f. Signature <i>[Signature]</i>	g. Date 5/26/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:	
b. Phone:	d. Phone:	
e. Special Handling Instructions and Additional Information:		
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable		
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.		
g. Operator's Name and Title (Print)	h. Signature	i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both		

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000784**GENERATOR (Generator completes Ia-r)**

a. Generator's US EPA ID Number 000000257		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085			e. Generator's Mailing Address: Surfco 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone: 312-826-7078			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm		1 DT	21.44 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSER OF SURFAC			q. Signature <i>[Signature]</i>		r. Date 05/26/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202	
b. Phone:	
c. Driver Name (Print) Larry B. Harty	d. Signature <i>[Signature]</i>
e. Date 5-26-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) S. KAGAN		f. Signature <i>[Signature]</i>	g. Date 5/26/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II, and III

000781

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 121110000		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Eastmore Dr. Waukegan, IL 60085		e. Generator's Mailing Address 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	23.43 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSEN OF SUTRAK 10 EPA			q. Signature <i>Carol Nissen</i>		r. Date 05/26/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSL 43185 N. Hwy 41 Zion, Illinois 60099 347-395-6202		
b. Phone: 7313	c. Driver Name (Print) Michael Griff. Hu	
d. Signature <i>Michael Griff. Hu</i>	e. Date 5-26-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Buge	f. Signature <i>D. Buge</i>	g. Date 5/26/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000783

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ID#06802627		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address 5811st 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-296-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	23.42 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSEY OF SOUTHWESTERN			q. Signature Carol Nissey		r. Date 05/26/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43155 N. Hwy 41 Zion, Illinois 60089 247-395-6202				
b. Phone: 71313	c. Driver Name (Print) Michael Griffith		d. Signature Michael Griffith	e. Date 5-26-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Dine	f. Signature D. Dine	g. Date 5/26/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000785

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 12-000000027		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085			e. Generator's Mailing Address 18 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-286-7078			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
NEW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm		1 DT	21.53	TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) CAROL NISSER				q. Signature [Signature]	r. Date 05/26/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43185 N. Hwy 41 Zion, Illinois 60099		
b. Phone: 847-394-6202		
c. Driver Name (Print) Michael G. [Signature]	d. Signature [Signature]	e. Date 5-26-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.				
e. Name of Authorized Agent (Print) D. Bye		f. Signature [Signature]		g. Date 5/26/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000787

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number ILD00080262		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address SulTrac 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-896-7073		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
CAROL NISSEDOF SULTRAC FOR EPA <i>Carol Nissedo</i>			05-26-10		
p. Generator Authorized Agent Name (Print)			q. Signature		r. Date

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: RTSI 43185 N. Hwy 41 Zion, Illinois 60099	
b. Phone: 847-394-6202	
c. Driver Name (Print) Michael G. [Signature]	d. Signature [Signature]
e. Date 5-26-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
b. Phone: (262) 884-7080		
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
b. Phone:	d. Phone:
e. Special Handling Instructions and Additional Information:	
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable	
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.	
g. Operator's Name and Title (Print)	i. Date
h. Signature	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II, and III

000773**GENERATOR (Generator completes Ia-r)**

Generator's US EPA ID Number ILD00080227		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address SedTrac 18 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 815-896-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	21.68 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haine		q. Signature <i>[Signature]</i>		r. Date 5/25/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: KTBI 43185 N. Hwy 41 Zion, Illinois 60099	
b. Phone: 7313	847-391-6202
c. Driver Name (Print) Michael Griffiths	d. Signature <i>[Signature]</i>
e. Date 5-25-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Brue	f. Signature <i>[Signature]</i>	g. Date 5/25/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III, and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000779

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ED0000022		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085		e. Generator's Mailing Address Safra 15. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSEN OF SUTRAK FOR EPA			q. Signature <i>[Signature]</i>		r. Date 05-25-10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43125 N. Hwy 41 Zion, Illinois 60090		b. Phone: 847-395-6202	
c. Driver Name (Print) Michael Goff	d. Signature <i>[Signature]</i>	e. Date 5-25-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000777

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL000049287		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 50 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address Satires 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone: 312-856-7078		g. Phone:				
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:		i. Owner's Phone No.:				
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	21.74	TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) CAROL NISSEJO DE SUTRAKORUSKA		q. Signature <i>[Signature]</i>		r. Date 05/26/10		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43183 N. Hwy 41 Zion, Illinois 60099 847-395-6202		b. Phone: 71313
c. Driver Name (Print) Michael Griffin	d. Signature <i>[Signature]</i>	e. Date 5-25-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) S. KAGAN	f. Signature <i>[Signature]</i>	g. Date 5/25/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000775

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL D000802827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seashore Dr. Waukegan, IL 60095		e. Generator's Mailing Address Sul Tac 18 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 212-236-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:			
h. Owner's Name:		j. Waste Profile #		k. Exp. Date	l. Waste Shipping Name and Description
		MW 3063106004		2/22/2011	C&D Contaminated w/PCB's less than 50ppm
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 269 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haine				q. Signature	r. Date 5/25/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43155 N. Hwy 41 Zion, Illinois 60099 847-395-6202		b. Phone: 7/3/3	
c. Driver Name (Print) Michael G. Pfl		d. Signature	e. Date 5-25-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Bryce		f. Signature D. Bryce	g. Date 5/25/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000778

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number 11-0000002527		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Ashmore Dr. Waukegan, IL 60085			e. Generator's Mailing Address Sultra 15 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7075			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 10ppm		1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) CAROL NISSEN OF SULTRAC OF USEPA				q. Signature Carol Nissen		r. Date 05-25-10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099		
b. Phone: 847-393-6202		
c. Driver Name (Print) Larry O. [Signature]	d. Signature [Signature]	e. Date 05-25-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000776

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ILD00080782		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085			e. Generator's Mailing Address SulTrac 15 Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone: 212-886-7072			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	20.08 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSEN OF SULTRAC AND USEPA			q. Signature <i>Carol Nissen</i>		r. Date 05/25/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60089 847-395-6202		
b. Phone:		
c. Driver Name (Print) Larry G. Hest	d. Signature <i>Larry G. Hest</i>	e. Date 5-25-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		b. Phone: (262) 884-7080
c. US EPA Number WID076171008	d. Discrepancy Indication Space:	
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) S. KAGAN	f. Signature <i>S. Kagan</i>	g. Date 5-25-10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000774

312-2

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL D000012827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seneca Dr. Waukegan, IL 60085		e. Generator's Mailing Address Sutrac 15 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-226-7072		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 10ppm	1	DT	21.23 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haine		q. Signature		r. Date 5/25/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: K781 43185 N. Hwy 41 Zion, Illinois 60099 847-395-6202		b. Phone:	
c. Driver Name (Print) Larry G. Hays	d. Signature	e. Date 5-25-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Byrne	f. Signature	g. Date 5/25/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000768

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number ILL00002527		b. Manifest Document Number 312-2		c. Page 1 of		
d. Generator's Name and Location: USEPA 20 Seaboard Dr. Waukegan, IL 60085 312-836-7078			e. Generator's Mailing Address SatTrac 151 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:			
h. Owner's Name:		i. Owner's Phone No.:				
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	20.50	TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Tom Haine			q. Signature		r. Date 5/29/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202		
b. Phone:		
c. Driver Name (Print) Lynn Gentry	d. Signature	e. Date 5/29/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Brey	f. Signature	g. Date 5/25/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		j. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000772

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 11-00030227		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085 f. Phone: 312-856-7078			e. Generator's Mailing Address SulTrac 18 Walker Avenue, Suite 3700 Chicago, IL 60606 g. Phone:		
If owner of the generating facility differs from the generator, provide: h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MTW 2063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Tom HAHNE	q. Signature 	r. Date 5/24/10
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II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 b. Phone: 847-393-6202		
c. Driver Name (Print) Loren Cr. HSTV	d. Signature 	e. Date 5-24-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
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I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

e. Name of Authorized Agent (Print)	f. Signature	g. Date
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IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000770

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ILD00050782		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085			e. Generator's Mailing Address Saf-Tac 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone: 312-886-7078			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 30ppm	1	DT	19.95 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom HAHNE			q. Signature		r. Date 5/24/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43155 N. Hwy 41 Zion, Illinois 60099		
b. Phone: 847-395-6202		
c. Driver Name (Print) Larry G. H...	d. Signature	e. Date 5-24-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Blye	f. Signature	g. Date 5/24/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000767

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number ILL000807827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Sedgwick Dr. Waukegan, IL 60085		e. Generator's Mailing Address Sedgwick 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-836-7072		g. Phone:			
If owner of the generating facility differs from the generator, provide: h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 2063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	20.67 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haine		q. Signature		r. Date 5/24/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: KTSI 43183 N. Hwy 41 Zion, Illinois 60099		b. Phone: 847-393-6202
c. Driver Name (Print) Larry B. H. by	d. Signature	e. Date 5/24/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Bue	f. Signature	g. Date 5/24/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000765

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ILD00680282		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085 f. Phone: 312-886-7078			e. Generator's Mailing Address Saline 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606 g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	20.75 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Hanne		q. Signature		r. Date 5/24/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-395-6202		b. Phone:	
c. Driver Name (Print) Larry Brink	d. Signature	e. Date 5-24-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Brye	f. Signature D. Brye	g. Date 5/24/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II, and III

000771

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL000080282		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 93 Seahorse Dr. Waukegan, IL 60085			e. Generator's Mailing Address 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone: 312-886-7078			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MTW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom HAHNE			q. Signature		r. Date 5/24/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-395-6202		
b. Phone: #313		
c. Driver Name (Print) Michael Griffiths	d. Signature	e. Date 5-24-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000769

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 1100000227		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Seneca Dr. Waukegan, IL 60085 312-886-7078		e. Generator's Mailing Address 15. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone:		g. Phone:				
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	22.59	TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Tom HANE		q. Signature		r. Date 5/24/10		

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202				
b. Phone:	c. Driver Name (Print) D. Brye		d. Signature D. Brye	e. Date 5/24/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Michael Griffler		f. Signature	g. Date 5-24-10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000766

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number ILD000802627		b. Manifest Document Number		c. Page 1 of 1	
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085 f. Phone: 212-226-7078		e. Generator's Mailing Address Sal Inc 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606 g. Phone:			
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:			
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	23.21 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Hanne		q. Signature		r. Date 5/24/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6212		b. Phone:
c. Driver Name (Print) D. Blye	d. Signature D. Blye	e. Date 5/24/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
f. Name of Authorized Agent (Print) Michael Griffiths	g. Signature	h. Date 5-24-10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		j. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II, and III

000764

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number IL140080782		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seneca Dr. Waukegan, IL 60085		e. Generator's Mailing Address Sutrac 18. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:		h. Owner's Name:			
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Hawke		q. Signature		r. Date 5/21/2010	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: KTSI 43123 N. Hwy 41 Zion, Illinois 60099		b. Phone: 847-394-6202	
c. Driver Name (Print) Michael Griffiths	d. Signature	e. Date 5-21-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
h. Signature		i. Date	
or refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II, and III

000756

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ILD00002647		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 50 Seneca Dr. Waukegan, IL 60085		e. Generator's Mailing Address 15. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-866-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSE OF SUTRA FOR USEPA (Print)			q. Signature <i>[Signature]</i>		r. Date 05/20/10

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099		
b. Phone: 847-393-6202		
c. Driver Name (Print) Lynn G. Miller	d. Signature <i>[Signature]</i>	e. Date 5/20/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000758

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL D000000000		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Sashone Dr. Washington, IL 60085		e. Generator's Mailing Address Salina 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone: 312-836-7078		g. Phone:				
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm		1	DT	21.48 TIV
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Tom Hanne			q. Signature		r. Date 5/20/2010	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202			b. Phone:		
c. Driver Name (Print) Larry G. H. K.			d. Signature		e. Date 5/20/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Brice		f. Signature D. Brice	g. Date 5/20/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
y. Operator's Name and Title (Print)		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000760

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ILD00080782		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60083		e. Generator's Mailing Address Sat Trac 1 E. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-826-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:					
i. Owner's Phone No.:					
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 10ppm		1 DT	21.42 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haine		q. Signature		r. Date 5/20/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: RTSI 43185 N. Hwy 41 Zion, Illinois 60099		b. Phone: 847-393-6202	
c. Driver Name (Print) Larry E. Hahn	d. Signature	e. Date 5-20-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		c. US EPA Number WID076171008		d. Discrepancy Indication Space:	
b. Phone: (262) 884-7080		I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. E. Hahn		f. Signature		g. Date 5-20-10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000761

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number ILD00080722		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seneca Dr Waukegan, IL 60085		e. Generator's Mailing Address: Suit 122 130 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 10ppm	1	DT	2194 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Harwin		q. Signature		r. Date 5/20/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: ETSI 43185 N. Hwy 41 Zion, Illinois 60099		
b. Phone: 847-393-6302		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		c. US EPA Number WID076171008	d. Discrepancy Indication Space:	
b. Phone: (262) 884-7080				
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.				
e. Name of Authorized Agent (Print) Michael Griffiths		f. Signature [Signature]		g. Date 5-20-10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:		
b. Phone:		d. Phone:		
e. Special Handling Instructions and Additional Information:				
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable				
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.				
g. Operator's Name and Title (Print)		h. Signature		i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both				

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II, and III

000762

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number ILD00000227		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Siskiyaw Dr. Waukegan, IL 60095		e. Generator's Mailing Address Self Inc 15. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-856-7078		g. Phone:			
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Tom Hanne	q. Signature 	r. Date 5/20/10
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TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099	
b. Phone: 847-393-6202	
c. Driver Name (Print)	d. Signature
e. Date 5/20/10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Michael Gottlieb	f. Signature 	g. Date 5/20/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature 	
i. Date		j. Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000763**GENERATOR (Generator completes Ia-r)**

Generator's US EPA ID Number IL D00080763		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seashore Dr. Waukegan, IL 60065		e. Generator's Mailing Address SulTras 18 Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-836-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm		1 DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haine		q. Signature 		r. Date 5/20/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: KTNI 43185 N. Hwy 41 Zion, Illinois 60099 847-395-6202		
b. Phone:		
c. Driver Name (Print) Bern Gulliford	d. Signature 	e. Date 5-20-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1889 Oakes Road Racine, WI 53406		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
b. Phone: (262) 884-7080			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
Operator's Name and Title (Print)		h. Signature	i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000757

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number 11-000005227		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address Suite 100 15. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone: 312-806-7978		g. Phone:				
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
J. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
MW 2063106004	2/22/2011	C&D Contaminated w/PCB's less than 30ppm		1 DT		

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) CAROL NISSEJOE SOUTER FOR USEPA	q. Signature Carol Nissejoe	r. Date 05/20/10
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TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-391-6202		b. Phone: 313
c. Driver Name (Print) Michael Griffith	d. Signature Michael Griffith	e. Date 5/20/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
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I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

e. Name of Authorized Agent (Print)	f. Signature	g. Date
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IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		i. Date	
Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000759

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number ILD000802627		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seashore Dr. Waukegan, IL 60085 312-896-7078		e. Generator's Mailing Address Suffolk 18 Walker Avenue, Suite 3700 Chicago, IL 60605			
f. Phone:		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	21.60 TR
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Hain			q. Signature		r. Date 5/20/2010

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60090 847-393-6202		
b. Phone:	#313	
c. Driver Name (Print) Michael Griffith	d. Signature	e. Date 5/20/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Bryce	f. Signature D. Bryce	g. Date 5/20/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
Phone:	d. Phone:
Special Handling Instructions and Additional Information:	
Material is <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both <input type="checkbox"/> % Friable <input type="checkbox"/> % Non-Friable	
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are properly packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and domestic regulations.	
h. Signature	i. Date
Company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or	



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000807

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL 000807827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seahorse Dr. Washington, IL 60085		e. Generator's Mailing Address 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #		k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity
MW 3063106004		2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	22.34 TN

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

Tom Haine
p. Generator Authorized Agent Name (Print)
q. Signature
r. Date 6/2/10

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099		b. Phone: 847-393-6202	
c. Driver Name (Print) Michael C. R...		d. Signature Walking Floor	
		e. Date 6-2-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
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I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

O. B...
e. Name of Authorized Agent (Print)
f. Signature
g. Date 6-2-10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

g. Operator's Name and Title (Print)
h. Signature
i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000806**GENERATOR (Generator completes Ia-r)**

a. Generator's US EPA ID Number IL D000802827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USIPA 90 Seabrook Dr. Waukegan, IL 60085 212-886-7078			e. Generator's Mailing Address Saffire 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			h. Owner's Name:		
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom HAHN		q. Signature 		r. Date 6/1/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43183 N. Hwy 41 Zion, Illinois 60099 847-395-6302		b. Phone:
c. Driver Name (Print) Larry B. H.	d. Signature 	e. Date 6-1-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:
b. Phone:		d. Phone:
e. Special Handling Instructions and Additional Information:		
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable		
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.		
g. Operator's Name and Title (Print)		i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both		

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000803**GENERATOR (Generator completes Ia-r)**

a. Generator's US EPA ID Number ILD000802627		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 98 Eisenhower Dr. Waukegan, IL 60085		e. Generator's Mailing Address Self Trac 13. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone: 312-825-7078		g. Phone:				
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:				
h. Owner's Name:		I. Waste Shipping Name and Description		m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
j. Waste Profile # MW 3063106004	k. Exp. Date 2/22/2011	C&D Contaminated w/PCB's less than 50ppm		1	DT	21.01 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Tom HARK		q. Signature 		r. Date 6/1/10		

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099		b. Phone: 847-391-6202	
c. Driver Name (Print) Larry G. Hark	d. Signature 	e. Date 6/1/10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.				
e. Name of Authorized Agent (Print) D. Buye		f. Signature 		g. Date 6/1/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
g. Operator's Name and Title (Print)		i. Date	
h. Signature 			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000805

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 11-00000001		b. Manifest Document Number		c. Page 1 of					
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085		e. Generator's Mailing Address: Suit 100 18 Walker Avenue, Suite 3700 Chicago, IL 60606							
f. Phone: 312-886-7078		g. Phone:							
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:							
h. Owner's Name:		j. Waste Profile #		k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol	
		MW 3063106004		2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT		
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.									
p. Generator Authorized Agent Name (Print) Tom H. Hines						q. Signature <i>[Signature]</i>			r. Date 6/11/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43185 N. Hwy 41 Zion, Illinois 60090 847-395-6202		b. Phone: 7313		
c. Driver Name (Print) Michael G. Goff		d. Signature <i>[Signature]</i>		e. Date 6-1-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		c. US EPA Number WID076171008	d. Discrepancy Indication Space:	
b. Phone: (262) 884-7080				
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.				
e. Name of Authorized Agent (Print) [Signature]		f. Signature <i>[Signature]</i>		g. Date 6/1/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:		
b. Phone:		d. Phone:		
e. Special Handling Instructions and Additional Information:				
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable				
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.				
g. Operator's Name and Title (Print)		h. Signature <i>[Signature]</i>		i. Date 6/1/10
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both				

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000804**GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number 12-000804		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Eastmore Dr. Waukegan, IL 60085		e. Generator's Mailing Address: 54112 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 30ppm	1	DT	20.63
					TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tina Haine		q. Signature 		r. Date 6/1/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202		b. Phone: 713/13	
c. Driver Name (Print) Michael G. Afks		d. Signature 	
		e. Date 6-1-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
b. Phone: (262) 884-7080			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Brie		f. Signature 	g. Date 6/1/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000801**GENERATOR (Generator completes Ia-r)**

a. Generator's US EPA ID Number ILDA000022		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085			e. Generator's Mailing Address: Sut Inc 15 Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone: 312-886-7078			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	m. Containers Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	21.23 TM
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Hains		q. Signature 		r. Date 6/1/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43155 N. Hwy 41 Zion, Illinois 60099 847-995-6202		b. Phone: Walking Floor	
c. Driver Name (Print) Michael Griffith	d. Signature 	e. Date 6/1/10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space: ii
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Baye	f. Signature 	g. Date 6/1/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date		j. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

If waste is asbestos waste, complete Sections I, II, III and IV
 If waste is **NOT** asbestos waste, complete Sections I, II, and III

000802

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 11-000002627		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: UNEPA 80 Seahorse Dr. Waukegan, IL 60085 312-486-7078		e. Generator's Mailing Address Sat Inc 15. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone:		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity
MDW 3063105004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	23.24 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Haines		q. Signature		r. Date 6/1/10	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: K781 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202		Walking Floor	
b. Phone:			
c. Driver Name (Print) Michael G. Pitts	d. Signature	e. Date 6/1/10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Buys	f. Signature	g. Date 6/1/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
Operator's Name and Title (Print)		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000795

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 1500067227		b. Manifest Document Number 312-2		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Seneca Dr. Waukegan, IL 60085			e. Generator's Mailing Address 15. Walker Avenue, Suite 3700 Chicago, IL 60606		
f. Phone: 312-886-7078			g. Phone:		
If owner of the generating facility differs from the generator, provide:			h. Owner's Name:		
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	20.09	TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom HANE			q. Signature		r. Date 5/28/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-393-6202		
b. Phone:		
c. Driver Name (Print) Tom HANE	d. Signature	e. Date 5/28/10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Brue	f. Signature D. Brue	g. Date 5/28/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
b. Phone:	d. Phone:
e. Special Handling Instructions and Additional Information:	
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable	
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.	
g. Operator's Name and Title (Print)	i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000797

GENERATOR (Generator completes Ia-r)

Generator's US EPA ID Number

b. Manifest Document Number

c. Page 1 of

d. Generator's Name and Location:

USEPA
90 Sedgwick Dr.
Waukegan, IL 60085
312-886-7078

e. Generator's Mailing Address

1 S. Walker Avenue, Suite 3700
Chicago, IL 60606

f. Phone:

g. Phone:

If owner of the generating facility differs from the generator, provide:

h. Owner's Name:

i. Owner's Phone No.:

j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
MW 3063106004	2/23/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	19.14 lbs	

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261

p. Generator Authorized Agent Name (Print)

q. Signature

r. Date

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

Transporter's Name and Address:

KTSI
43185 N. Hwy 41
Zion, Illinois 60089
847-395-6202

b. Phone:

c. Driver Name (Print)

d. Signature

e. Date

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:

Kestrel Hawk Recycling & Disposal Facility
1989 Oakes Road
Racine, WI 53406
b. Phone: (262) 884-7080

c. US EPA Number

WID076171008

d. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

e. Name of Authorized Agent (Print)

f. Signature

g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:

c. Responsible Agency Name and Address:

b. Phone:

d. Phone:

e. Special Handling Instructions and Additional Information:

f. ☐ Friable ☐ Non-Friable ☐ Both % Friable % Non-Friable

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

g. Operator's Name and Title (Print)

h. Signature

i. Date

*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000800

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number IL D000002827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 50 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address Suffred 1 S. Walker Avenue, Suite 3700 Chicago, IL 60605			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:			
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/23/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Hainke		q. Signature		r. Date 5/28/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099		b. Phone: 847-393-6202	
c. Driver Name (Print) Michael G. Smith	d. Signature	e. Date 5-28-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable International and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000798

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 12000000000000000000		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: US EPA 90 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address 15. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	23.01 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Ton Harris		q. Signature 		r. Date 5/28/10	

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

IIa. Transporter's Name and Address: KTSI 43185 N. Hwy 41 Zion, Illinois 60099 847-395-6202		b. Phone: 7313	
c. Driver Name (Print) Michael G. Miller		d. Signature 	e. Date 5-28-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080		c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Kestrel		f. Signature 	g. Date 5-28-10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000796

GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number 111000802827		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: USEPA 90 Seaboard Dr. Waukegan, IL 60085		e. Generator's Mailing Address Self Trac 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606				
f. Phone: 312-886-7078		g. Phone:				
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:				
h. Owner's Name:		i. Owner's Phone No.:				
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	20.31	TN

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Tom HAHNE	q. Signature 	r. Date 5/28/10
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TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: RTSI 43185 N. Hwy 41 Zion, Illinois 60089 847-395-6202		b. Phone: #313
c. Driver Name (Print) Michael Gertler	d. Signature 	e. Date 5-28-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) D. Bryce	f. Signature 	g. Date 5/28/10

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000799**GENERATOR (Generator completes Ia-r)**

a. Generator's US EPA ID Number ILD00002827		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 90 Eastmore Dr. Waukegan, IL 60085		e. Generator's Mailing Address 15. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
MW 3063106004	2/22/2011	C&D Contaminated w/PCH's less than 50ppm	1	DT	
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Harn			q. Signature 		r. Date 5/28/10

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43155 N. Hwy 41 Zion, Illinois 60099 847-393-6302		
b. Phone:		
c. Driver Name (Print) Larry Goff	d. Signature 	e. Date 5-28-10

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406 b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:	c. Responsible Agency Name and Address:
b. Phone:	d. Phone:
e. Special Handling Instructions and Additional Information:	
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable	
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.	
g. Operator's Name and Title (Print)	h. Signature
i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000789**312-2****I. GENERATOR (Generator completes Ia-r)**

a. Generator's US EPA ID Number IL D000802627		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USPCA 90 Seaborn Dr. Westmont, IL 60095		e. Generator's Mailing Address 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-386-7072		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
AW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 50ppm	1	DT	21.39 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL WISSEK OF SOUTHERN FOR USPCA		q. Signature <i>Carol Wissek</i>		r. Date 05/27/10	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43185 N. Hwy 41 Zion, Illinois 60099 847-395-6202	
b. Phone:	
c. Driver Name (Print) Long Griffith	d. Signature <i>Long Griffith</i>
e. Date 5-27-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406		b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.				
e. Name of Authorized Agent (Print) D. Buys	f. Signature <i>D. Buys</i>	g. Date 5/27/10		

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information: OPH JK			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both <input checked="" type="checkbox"/> % Friable <input type="checkbox"/> % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II, and III

000793

GENERATOR (Generator completes Ia-r)

a. Generator's HS/EPA ID Number ED0000227		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: USEPA 50 Seahorse Dr. Waukegan, IL 60085		e. Generator's Mailing Address Surf Trac 1 S. Walker Avenue, Suite 3700 Chicago, IL 60606			
f. Phone: 312-886-7078		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity
MW 3063106004	2/22/2011	C&D Contaminated w/PCB's less than 30ppm	1	DT	20.57 TN
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) CAROL NISSEN OF SULTAC for USEPA Carol Nissen			q. Signature <i>[Signature]</i>		
			r. Date 05/27/10		

TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: KTBI 43183 N. Hwy 41 Zion, Illinois 60099	
b. Phone: 847-395-6292	
c. Driver Name (Print) James G. Harty	d. Signature <i>[Signature]</i>
e. Date 05-27-10	

III. DESTINATION (Generator completes IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Kestrel Hawk Recycling & Disposal Facility 1989 Oakes Road Racine, WI 53406	b. Phone: (262) 884-7080	c. US EPA Number WID076171008	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) D. Bryce	f. Signature <i>[Signature]</i>	g. Date 5/28/10	

IV. ASBESTOS (Generator completes IVa-f and Operator completes IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			